

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smy	9	30/06
O.I.P.E. CLASSIFIER		10	105.00
FORMALITY REVIEW	BD	66959	17-19-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/24/06
2	✓	✓	11/24/06
3	✓	✓	11/24/06
4	✓	✓	11/24/06
5	✓	✓	11/24/06
6	✓	✓	11/24/06
7	✓	✓	11/24/06
8	✓	✓	11/24/06
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If more than 150 claims or 10 actions  
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